

**Travel Request Form  
for  
County Officials, Department Heads & Employees**

Date of Request: \_\_\_\_\_

Department: \_\_\_\_\_

Employee: \_\_\_\_\_

Date(s) of Travel: \_\_\_\_\_ Destination: \_\_\_\_\_

Purpose: \_\_\_\_\_

Is this a State called meeting? Yes \_\_\_ No \_\_\_

**Event agenda, brochure or letter must be attached**

Lodging Required: \_\_\_\_\_

Means of Travel: \_\_\_\_\_

County Vehicle Number: \_\_\_\_\_ Other: \_\_\_\_\_

Reimbursement Claimed:

Mileage \_\_\_\_\_ Parking \_\_\_\_\_

Per diem \_\_\_\_\_ Registration \_\_\_\_\_

Airfare \_\_\_\_\_ Other \_\_\_\_\_

Breakfast provided? Yes \_\_\_ No \_\_\_ Lunch provided? Yes \_\_\_ No \_\_\_

Dinner provided? Yes \_\_\_ No \_\_\_

Source of Funding: \_\_\_\_\_

Has this been approved to be paid out of unappropriated funds? Yes \_\_\_ No \_\_\_

Total estimated cost of trip: \_\_\_\_\_

Approved: \_\_\_\_\_  
Department Head

Approved: \_\_\_\_\_  
Office Holder

**Approved by the Board of Commissioners on this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_**

\_\_\_\_\_  
County Commissioner

\_\_\_\_\_  
County Commissioner

\_\_\_\_\_  
County Commissioner